



National WASH Partners Key Informant Interview Report for Strengthening Integration of WASH into the ENGINE Project

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List of Acronyms

ADAs – Agricultural Development Agents

ADP – Agricultural Development Program

AGP - Agricultural Growth Program

BCC - Behavior Change Communication

CCRDA— Christian Relief and Development Association

CLTSH - Community–Led Total Sanitation Hygiene

ETF - Emergency Task Force

FMOWE- Federal Ministry of Water and Energy

FMOFED – Federal Ministry of Finance and Economic Development

FMOH - Federal Ministry of Health

FSL - Food Security and Livelihood

GOE - Government of Ethiopia

HEWs - Health Extension Workers

HH – Household

HQ – Headquarters

IEC-Information, Education and Communication

IRC – International Rescue Committee

MAM – Moderate Acute Malnutrition

MDG - Millennium Development Goal

M&E - Monitoring and Evaluation

NGO - Nongovernmental Organization

NWI - National WASH Inventory

NFI – None Food Items

O& M- Operation and Maintenance

PHC - Public Health Care

SC - Save the Children

S & H - Sanitation and Hygiene

SNNPR - Southern Nations, Nationalities, and Peoples' Region

UAP – Universal access Plan

UNOCHA – United Nations Office for Coordination of Humanitarian Affairs

WASH - Water, Sanitation and Hygiene

WASHCo - Water, Sanitation and Hygiene Committee

WIF - WASH Implementation Framework

WSP – Water and Sanitation Program

1. Introduction

1.1. Background

Save the Children (SC) has been operating in all regions of Ethiopia since 1973. Their development and humanitarian programs include education, health and HIV/AIDS, nutrition, food security and livelihood, child protection and rights, and Water, Sanitation and Hygiene (WASH) thematic areas.

SC leads the implementation of ENGINE, USAID's \$53 million flagship multi-sector nutrition project, in 83 Agricultural Growth Program (AGP) *woredas* (districts) and 17 non-AGP *woredas* covering four regions (Amhara, Oromia, SNNPR and Tigray) of Ethiopia. The overall goal of this five-year project (2011-2016) is to prevent stunting during the first 1,000 days, from the start of pregnancy through the first two years of a child's life, through an integrated package of evidence-based interventions including direct nutrition and nutrition-sensitive approaches, pre-service education, livelihood and economic strengthening, and gender mainstreaming.

Given the strong bi-directional relationship that exists between stunting and childhood illness, especially diarrheal diseases, SC is strengthening the integration of WASH into its comprehensive nutrition package. As part of this process, SC conducted a mapping exercise to gather information on the existing WASH situation, including gaps, opportunities for collaboration, and recommended action for working more effectively with national WASH partners.

1.2. Methodology

Methodology entailed reviewing secondary data (policy, strategies, manuals, guidelines, reports, and research) including SC WASH strategy documents and key informant interviews with selected national WASH partners in Addis. ENGINE project staff and the SC WASH Advisor conducted key informant interviews with national WASH partners.

1.3. Scope of Work

The scope of work includes reviewing secondary data sources (policy, strategies, manual, guidelines, reports, and research), conducting key informant interviews, and identifying the way forward in the integration of WASH into the ENGINE Nutrition Program and areas of collaboration with national WASH partners.

1.4 Limitations of the Assessment

Given time limitations, the mapping and key informant interview exercises focused on limited WASH partners in Addis Ababa. Therefore, the findings may not represent all WASH partners working in Ethiopia. Further investigation at the *woreda*, *kebele* and household (HH) level is necessary as part of the triangulation.

2. Findings of the Secondary Data Review and National WASH Partners

2.1. Overview of WASH Sector in Ethiopia

The Government of Ethiopia (GOE) has made progress toward achieving the Millennium Development Goals (MDGs) in the last decade, and demonstrated commitment toward reducing poverty. It has remained committed to creating conditions favorable for the WASH sector through developing policies, strategies, programs, and implementation frameworks. The country has developed ambitious plans with targets beyond the MDG targets in its Growth and Transformation Plan (GTP), Universal Access Plan (UAP) and Water and Sanitation and Hygiene Access Plan (SAP), toward addressing the WASH sector. The target of the UAP for access to water supply is 98.5% and 100% for access to improved sanitation by 2015. However, the 2012 National WASH Inventory (NWI) report indicates that the water supply coverage stands at 54.3% and sanitation coverage at 54.8%. Also, the rural water supply schemes non-functional rate was only 25%. The findings of the WASH inventory indicates that there is a definite need to improve WASH coverage to achieve the MDG's.

2.2. Summary Findings on Key Informant Interviews for National WASH Partners

The GOE has developed numerous policy and strategic documents in collaboration with WASH partners and is committed to improving water and sanitation coverage and achieving the WASH MDG goals through coordination and partnership. Despite the the collaboration of WASH partners on water and sanitation issues, there is still a huge gap in the implementation of WASH programs. This assessment found that although most organizations promote the integrate of water, sanitation, and hygiene, the priority is water supply. Government offices, in collaboration with WASH partners, have introduced coordination and networking mechanisms at the national, regional, and woreda level to discuss the existing WASH gaps and the use of appropriate and affordable technologies, integration, and harmonization at all levels. However, the existing technical working groups and task forces are focusing on the humanitarian response rather than focuson development programs.

Almost all WASH partners are involved in system strengthening and working with government offices to increase the involvement of the community in WASH Committee (WASHCo) establishment and project implementation, to strengthen the woreda WASH team, National WASH Inventory (NWI) system, and supply chain through microfinance and small scale private enterprise. Currently the WASH partners have been working with supply chain guidelines and legalization of WASHCos. They have recommended social marketing to follow the demand driven approach rather than providing spare parts and tools. Understanding the high staff turnover of water professionals from government offices to private sectors, they stressed the importance of capacity building for the water engineers to improve WASH sector performance.

3. Recommendations for Integration of WASH into the ENGINE Project

1. Provide safe and adequate water supply with construction and rehabilitation water schemes at the health care facility and community level using appropriate and affordable WASH technologies.
2. Promote safe water handling and storage, the use of water quality test kits, food hygiene, handwashing during critical times, the importance of latrines, etc., by using Community-Led Total Sanitation Hygiene (CLTSH), community conversation, and other feasible means through health extension workers (HEWs), IEC, and mass media campaigns.
3. Initiate capacity building for government offices, WASHCos, HEWs, agriculture development agents (ADAs), private sector (artisans and contractors), and the community as a whole through a well-defined and systematic approach.
4. Create an enabling environment for the legalization of WASHCos and sanitation marketing guideline development in collaboration with government offices and WASH partners.
5. Strengthen the woreda WASH team in the implementation of a WASH Implementation Framework (WIF) and link the ENGINE WASH project with government programs.
6. Utilize the existing coordination meetings and networks for sector-wide learning, knowledge management, and sharing platforms and links with nutrition and WASH advocacy works.
7. Promote the full involvement of women, children, and the beneficiary community in the planning, implementation, and decision-making process to play a leading role in project implementation by considering cross-cutting issues.

Annex 1 – Key Informant Interview Findings for National WASH Partners

UNICEF Ethiopia

UNICEF has been operating in Ethiopia since 1952 and has a presence in all regions of the country. helping children survive and thrive, from early childhood through adolescence. UNICEF supports child health and nutrition, clean water and sanitation, quality basic education for all boys and girls, and the protection of children from violence, exploitation, and AIDS. Its core strategy is to support government programs to increase access, especially for the most vulnerable communities. Key components of their programs are: (1) Survival and Health (includes WASH and nutrition); (2) Learning and Development (focus on basic education); (3) Protective Environment and Disaster Risk Reduction (includes social protection); (4) Analysis, Communication, and Participation.

Recently UNICEF Ethiopia has received approximately \$34 million for a five-year integrated WASH and Nutrition Project to be implemented in 30 woredas in the four big regions. In this project, WASH will focus on community, institution (16 schools), and multiple use of water. Vegetable gardening will be considered under multiple use of water (if the water is ample) and they will promote the use of human excreta as fertilizer for vegetable gardening. The community will demonstrate the link between food security, reduction of stunting, and diarrhea diseases. Integration of school- and community-led total sanitation is a key priority of this project. School children will be role models in disseminating hygiene messages to the HHs through a school-led total sanitation approach.

UNICEF will promote sanitation marketing at the woreda and kebele levels. They have selected eight pilot woredas for sanitation marketing and self supply. RIPPLE is one of their partners in the design and production of IEC materials for the project. They are willing to share the existing UNICEF WASH lessons learned and new IEC materials produced by RIPPLE.

UNICEF has a strong interest in system strengthening and capacity-building for private sectors such as WASHCos and local artisans. They have explained the importance of working with woreda WASHCos in planning, implementation, and monitoring and evaluation (M&E) including the allocation of funds for capacity building. They recommend assessing private sector capacity gaps for partnership opportunities.

UNICEF has been working at the national, regional, zonal, woreda, and kebele levels with sector ministries and various NGOs. As active members of the S&H task force under the FMOH, WASH ETF, multi-sector forum, WASH movement, and others, they are willing to collaborate with SC in planning and sharing important documents from their intervention woredas. They have offered their advice on sanitation and hygiene promotion including maintenance of WASH facilities in ENGINE operational woredas.

The Water and Sanitation Program

The Water and Sanitation Program (WSP) is a multi-donor trust-funded program administered by the World Bank. The WSP-Africa regional team (WSP-AF) has its headquarters (HQ) in Nairobi, with a sub-regional hub in Dakar. WSP's mission is to support the poor in obtaining sustainable access to water and sanitation services. WSP is committed to being part of the collective efforts of community development to achieve the MDGs as an intermediate milestone of the vision of the sector. WSP will bring this mission into reality in two ways: (1) Direct means - to support implementation of sector dialog, knowledge exchange, and capacity building; and (2) Indirect means- to help immediate counterparts and partners to build large-scale sustainable programs, support policy development and sector reforms, and engage in action-learning innovative pilot projects that serve the poor, in particular.

WSP Ethiopia is neither a donor nor an NGO. Sector priority is improving the sanitation and hygiene situation of the country through capacity building. Currently the organization is working with the FMOH in 104 woredas of Tigray, Amhara, Oromia, and SNNPR on total behavior change with the existing government structure using HEWs. They have developed the CLTSH implementation strategy and guidelines in collaboration with the FMOH, UNICEF and other WASH partners. This strategy has been adopted and rolled out by the FMOH as a working manual for 11 regions of Ethiopia to achieve sanitation MDG by 2015.

There is no nutrition department under the World Bank programs, but they understand the importance of nutrition as part of poverty reduction measures to support 40% of the world population living under poverty. They have agreed to integrate WASH into nutrition (and nutrition into WASH) since hygiene promotion doesn't require a large investment. They are planning to develop a strategy to coordinate and collaborate with the government offices and WASH partners by establishing a working group (multi-sector consultation). This strategy document will be an important job aid to integrate WASH and nutrition for different professionals.

They are also in the process of developing a concept note to finance this workshop. They are working at the national, regional, zonal, woreda, and kebele levels with sector ministries, various NGOs, are active members of S&H task force under the FMOH, multi-sector forum, and WASH movement under WaterAid. System strengthening and working with government offices is their key priority. They are working on strengthening WASHCo and the supply chain through microfinance and small-scale private enterprise to sustain their services. Currently they have been working on the supply chain guidelines with other WASH partners. They recommend social marketing to follow the demand driven approach rather than providing the usual spare parts and tools.

Plan Ethiopia

Plan International (Plan) has global presence in 69 countries and is one of the oldest and largest children's development organizations in the world. Plan implements programs in 50

developing countries across Africa, Asia, and the Americas to support children's welfare, reduce child poverty, and promote opportunities for children to realize their full potential. Plan works in partnership with children, communities, and like-minded organizations committed to improving children's circumstances. Plan is an independent organization with no religious, political, or governmental affiliations and is an equal opportunity employer. Plan has been operating in Ethiopia since 1995, and currently operates in four regions of the country with a range of multi-sectorial development and humanitarian programs.

Plan Ethiopia (PE) is operational in Amhara, Oromia, SNNPR, and Addis Ababa. They have integrated early child survival, protection of children, and women and children health projects. PE is mainly involved in constructing water schemes at community and institution levels, training the communities on sanitation and hygiene education, and supporting the construction of latrines through the CLTSH approach. They also work to strengthen community-based organizations and local NGOs to help them participate more effectively in health and other development issues. Currently they have been working with UNICEF in implementing CLTSH in 55 woredas of Amhara, Oromia and SNNPR. They don't have a specific WASH integrated nutrition project but they are working on food security and natural resource management projects where WASH, nutrition, and livelihood are included.

All Plan projects are implemented in collaboration with government offices. With no funding constraints for sanitation and hygiene promotion including water supply, they directly finance the water and health office even though the WIF was not operationalized at the woreda level. They screen heavily in their selection of implementing partners for their projects and they advised ENGINE to put more emphasis on partner selection.

They have been working at the national, regional, zonal, woreda, and kebele levels with sector ministries and various NGOs and are active members of the S&H task force under the FMOH, multi-sector forum, WASH movement, and others. They have established regional CLTSH networking in Amhara, Oromia, and SNNPR chaired by the regional health department. Due to numerous coordination meetings at the national and regional level, PE is busy with meetings that affect the day-to-day program implementation. They suggested each organization should have their own focal person for coordination and networking.

PE involves the community at all stages of the project lifecycle and follows the demand driven approach. They have trained community, WASHCos, and local artisans in the management and maintenance of water and sanitation facilities. Although they are involved in sanitation marketing guideline development and have tried to establish a supply chain in some woredas, the tools are not being used. With limited private sectors in sanitation marketing but many in water construction work, they still have limited capacity (skill and finance). They also understand high staff turnover for water professionals from government offices and they stressed the importance of capacity building for water engineers to improve WASH sector performance.

WaterAid Ethiopia

WaterAid Ethiopia (WAE) focuses on using practical solutions to provide safe water, improve sanitation and hygiene education, and influence policy at the national and international level. Committed to working with local partners, WAE hosts and chairs the WASH Ethiopia movement and chairs the water and sanitation forum at CCRDA. WAE is working closely with sector policy development such as WASHCo legislation, WASH communication and behavior changes.

WAE implements integrated water, sanitation, and hygiene promotion projects in community, institution, and urban settings. The organization operates in 20 woredas in Tigray, Amhara, Oromia, SNNPR, Benishangul Gumize, and Addis Ababa. With 17 local partners, they are implementing a food security project with Irish Aid funding at the community and HH levels. By introducing eco-san technology, they address HH food security through vegetable gardening using compost produced by eco-san.

They are willing to collaborate with SC in WaterAid operational regions. They have been working at the national, regional, zonal, woreda, and kebele levels with sector ministries and other WASH partners. WAE's WASH movement is strong in advocacy and influencing the government office in policy change. Currently they are working on supply chain and legalization of WASHCos at the regional level with WASH partners.

World Vision Ethiopia

World Vision is a Christian-based, humanitarian organization working throughout the world. Its involvement in Ethiopia dates back to 1971 when the organization gave relief assistance to the Neur tribes in southern Sudan and the Meskoku tribes in Gode area of the Ogaden. World Vision Ethiopia (WVE) was officially registered on March 3, 1975 and is the regional center for east Africa. Responding to the needs of the poorest of the poor, WVE is a partner in transformational development with a learning center to introduce research and innovative ideas at grassroots level.

WVE has multi-year integrated development programs and WASH is one of their larger programs with an annual budget of over \$15 million. Out of 102 Agricultural Development Programs (ADPs) in the country, 62 ADPs are WASH operational woredas. They use a multi-disciplinary team in the design and implementation of projects such as community, institutional, and refugee camps. To improve the livelihood conditions of the HHs, they are working on multiple use of water by introducing manual drilling technology up to a depth of 35 meters. They are also implementing the CLTSH approach to improve the sanitation conditions of HHs plan on introducing the BCC approach to build on CLTSH behavior related issues.

WVE appreciates institutional leadership and is involved in various coordination and networking efforts lead by the FMOH, FMOWE, UNICEF, CCRDA, and others. With a focus on cost effectiveness, they prefer the use of effective technology to improve WASH gaps

rather than capital intensive WASH progress. They have suggested that WASHCos should be legalized and sanitation marketing should follow the marketing principles. Working on capacity building for local artisans with manual drilling technology, they have piloted 4 ADPs and are planning to outsource the drilling operation for them.

Oxfam GB

Working in Ethiopia since 1974, Oxfam focuses on sustainable livelihoods, water and sanitation, climate research, gender, and humanitarian response. In collaboration with their partners, they also work in education, health, market development, and small business cooperatives in the major pastoral areas of the country (Somali, Afar, South Omo zone in SNNPR and Borena zone in Oromia regions). Currently, they are working on emergency food security, livelihood, and WASH at community and refugee settings in pastoral communities.

Although Oxfam doesn't have a nutrition program and has limited experience in program integration, sometimes the livelihood and food security project integrates WASH. Oxfam recognizes the importance of integrating all components of water, sanitation, and hygiene in emergency situations, that is, without water it is not possible to promote sanitation and hygiene. The NGO is willing to collaborate with SC in their operational woreda if there is any overlap and they are currently involved in existing WASH coordination, such as WASH ETF, WASH cluster (UNICEF, IRC, and Oxfam), WASH movement meeting and others, at all levels of WASH and humanitarian interventions.

Oxfam tends to implement projects with local partners, contractors, and government offices as part of their capacity building strategy, recognizing the importance of building skills and financial capacity to enhance their performance. To improve the supply chain, Oxfam is providing seed money for WASHCos and cooperatives. In collaboration with Nokia Company, they are piloting drought early warning signals using mobile technology for motorized water schemes. The cost will be \$5,250 to install 100 boreholes in pastoral communities in Ethiopia.

GOAL Ethiopia

GOAL is an Irish-based international NGO with programs in humanitarian response, rural development, and street children. The Humanitarian Response Program focuses on nutrition intervention activities, working with the FMOH to monitor the nutrition, health, and food security status in current intervention areas of Amhara, Oromia, and SNNPR. The Rural Development Program focuses on health, education, nutrition, water, and sanitation with cross-cutting issues in gender, environment protection, and HIV/AIDS. Located in Addis Ababa, the Street Children Program focuses on the strengths of homeless children and young people. Through partnership building, collaboration, and networking with various stakeholders, the program supports diverse community structures and initiatives.

Their development and emergency programs have been integrating WASH into all stages of the project lifecycle, especially the emergency nutrition projects, by emphasizing hygiene

promotion. Working with the FMOH, the sanitation and hygiene promotion is already included in the national nutrition guidelines and IEC (Yemikikir Card). They are responding to the increased demand for water in nutrition affected woredas by constructing a roof water harvesting structure at health facilities with funds obtained from Irish Aid. However, the budget allocated for hygiene promotion is very low compared to the nutrition budget and is mainly used for the purchase of jerry cans with tap, soap, promotion of tip tap, and availing water treatment chemicals for health facilities.

GOAL is actively engaging in all emergency nutrition coordination meetings including the UNOCHA. Since the GOE has limited capacity and budget to respond to emergencies, GOAL is supporting them with water trucking and NFI's distribution for drought affected people. In turn, the GOE is providing GOAL with skilled manpower in the health facilities when available. There is, however, little integration of development projects in different sectors due to a lack of transparency, poor decision making, and loose institutional structure on the government side.

GOAL has been working closely with woreda water and health offices in building the capacity of WASHCos, school WASH clubs, and local artisans. During nutrition interventions, they provide practical skills on hand washing during critical times, tip tap, and water treatment.

Merlin Ethiopia

Merlin is mainly focused on health and nutrition and is not involved in water and sanitation projects. In some cases, WASH is cross-cutting into feeding centers and with the existing nutrition program. Currently, they are working with the ECHO project to integrate Food, Security and Livelihood (FSL), health and nutrition, and WASH activities.

They have worked on nutrition causal analysis research, mapping of highly food in secured woredas, and the independent cause of malnutrition in Ethiopia. They are also planning to study Severe Acute Malnutrition (SAM) and MAM and their complications. Merlin advised SC to work on the integration of WASH into nutrition projects at health care facilities.

Federal Ministry of Health (FMOH)

FMOH WASH Focal Person

Previously, WASH was one department under the FMOH. Currently, it is under the Public Health Care (PHC) and Family Health Service Directorate. In Ethiopia, there is limited understanding about Environmental Health; some consider it WASH even though it has seven components. They are using HEWs to implement CLTSH in 40 woredas from the Global Sanitation Fund under WIF, the new implementation framework. They have been successful at utilizing bilateral donor funding and WIF to fill the existing gaps in sanitation and hygiene promotion. They have also been working on water quality control as part of the regulatory

work and distribution of HH water treatment chemicals through the government structure at health care facilities.

Due to limited funding, they are pushing donors to finance this sector in capacity building. Food hygiene is another key priority area to prevent foodborne diseases and latrine construction to reduce parasitic infection. Although some organizations are working on deworming, they are being advised that having latrines at the HH level will be the last solution for the reduction of parasitic infection. The FMOH is happy to work with SC in food hygiene, as part of the integration and collaboration, by establishing national and regional technical working groups. They are currently developing a concept note on food hygiene to request funding from SC and other funding agencies.

As the leader of the sanitation and hygiene taskforce and other sector specific sanitation and hygiene technical working groups, they have stressed the importance of sanitation marketing and the involvement of private sectors to achieve their MDGs in number and capacity.

FMOH Nutrition Focal Person

Initially the FMOH developed a strategy mainly focusing on specific sectors to address communal and institutional nutrition issues. Following this strategy, an additional document called the National Nutrition Program was developed which involved the nine sector ministries. In this program, child protection issues were considered and nutrition is integrated within the health institutions.

A system for coordination and networking was developed at the federal and regional levels which resulted in national biannual coordination meetings and quarterly regional technical committee meetings. The technical working group has five strategic objectives to address. Letters of invitation for regional technical committees have been establishment and sent to 11 regions. Tigray, Amhara and Oromia regions have established their own regional technical committees.

Even though more than 50 partners are working on nutrition, there is no budget for nutrition advocacy. The FMOH is approaching UNICEF and SC to assist them in establishing regional coordination and technical working groups at the grassroots level in order to create overall awareness on proper feeding and hygiene practices and system strengthening.

Annex 2 - List of WASH Documents Gathered and Reviewed from National WASH Partners

1. Ethiopian water resource management policy, FMOWE
2. Ethiopian water sector strategy, FMOWE
3. Part II rural water supply UAP, FMOWE
4. Universal access plan in four parts, FMOWE and FMOH
5. WASH Implementation Framework, August 2011 by FMOWE, FMOH, FMOE and FMOFED
6. National Policy guidelines for self-supply in Ethiopia, January 2012 by FMOWE
7. National water, sanitation, and hygiene budget tracking study, July 2013 by CCRDA – WSF
8. WASH sector review, June 2013 by WASH Ethiopia movement - WaterAid
9. Good practice principles water development in dry lands of the Horn of Africa, March 2013 by FAO
10. National hygiene and sanitation strategy, October 2005 by FMOH
11. National protocol for hygiene and "on-site" sanitation, June 2006 by FMOH
12. Ethiopia Environmental Health Country Sector Strategy, FMOH
13. Implementation guideline for CLTSH programming, January 2012 by FMOH
14. National monitoring and reporting system for the implementation of CLTSH, January 2012 by FMOH
15. CLTSH verification and certification protocol, January 2012 by FMOH
16. CLTSH facilitator training guide, January 2012 by FMOH
17. Humanitarian development report, 2013 by UNDP
18. Baseline household survey, institutional performance school assessment conducted 22 woredas of Amhara regional state, December 2008 by WSP-AF and USAID-HIP
19. Results from working at scale for better sanitation and hygiene in Amhara, Ethiopia, April 2011 by WSP and USAID-HIP
20. Monitoring and evaluation framework for Amhara region "leading by doing" program to achieve universal hygiene and sanitation, November 2008 by ANRSHB
21. USAID water and development strategy 2013 – 2018 by USAID
22. Integration of water, sanitation, and hygiene into nutrition programming, May 2013 by USAID and WASH plus
23. Water, sanitation, and hygiene improvement training package for the prevention of diarrheal diseases, guide for training outreach workers, 2009 by USAID-HIP
24. Water, sanitation, and hygiene improvement training package for the prevention of diarrheal diseases, outreach workers handbook, 2009 by USAID-HIP
25. Save the Children WASH strategy, 2013 by Save the Children

Annex 3 – National WASH Partners Key Informant Interview Checklist

Save the Children Ethiopia: WASH Need Gap Analysis

Checklist - Key Informant Discussion with National Level Partners

Discussant: -----

Date: -----

| | | |
|---|----------------------------|-------------|
| Date/Time: | Organization: | Person Met: |
| | | |
| Introduction/Purpose of the discussion | | |
| ISSUES FOR DISCUSSION | Note/Recording main points | Follow up |
| What are your key focus & priority areas in WASH program design and implementation (community & institutional WASH, using different technology options and integration of different approaches) and what are the risks and assumptions? | | |
| What is your experience in integration of different programs (livelihood, health, nutrition, WASH, education, etc.) and the implications on program quality? Do you have WASH integrated into nutrition? If yes, what are the areas of collaboration with SC? | | |
| What areas of collaboration, coordination, and partnership are required among government, donors, and implementation partners to fill the existing gaps in water, sanitation, and hygiene? | | |
| How do you explain WASH sector performance with respect to the presence of one WASH plan, budget, and report (WIF), progress toward MDG, UAP, GTP? Have you seen the recent WASH inventory results? What are some of the gaps which need corrective actions? | | |
| What is your level of involvement in the existing coordination and networking mechanism at national, regional, and woreda levels to strengthen WASH management and sustainability? What are some of the challenges and ways to improve? | | |
| What is the engagement of private sectors (both in capacity and #) in introducing | | |

| | | |
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| the different options of WASH technologies (spare parts and service) and social marketing? What are the gaps in doing the above assignments? | | |
| What are capacity building gaps observed in woreda WASHCOs, O&M, and supply chain management (spare parts and hand tools) in your operational area and how do you address it? | | |
| What are the key WASH areas of priority for immediate action and collaboration? | | |
| Do you have any WASH documents (policy, strategy, guidelines, standards, lessons learned, or publications) that you want to share with us (your own and/or shared from other partners)? | | |

Annex 4 - List of Interviewers and Key informant Interview Participants

| | Name | Organization | Remarks |
|-----|--------------------------|--------------------|-------------------------|
| 1. | Mr. Muhammad Irfan | UNICEF | Key informant interview |
| 2. | Mr. Kebede Faris | WSP | Key informant interview |
| 3. | Mr. Atnafe Beyene | Plan International | Key informant interview |
| 4. | Mr. Manaye Siyum | WaterAid | Key informant interview |
| 5. | Mr. Robel Lambisso | World Vision | Key informant interview |
| 6. | Mr. Mateme Tora | Oxfam GB | Key informant interview |
| 7. | Mr. Getenet and Esreal | GOAL | Key informant interview |
| 8. | Dr.Betemariam G/zewde | Merlin | Key informant interview |
| 9. | Mr. Dagn and Birara | FMOH | Key informant interview |
| 10. | Dr. Belaynesh Yifru | Save the Children | interviewer |
| 11. | Mr. Asamnew Abayneh | Save the Children | Interviewer |